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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *none H M /*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *OK H M /*

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 4	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Michael D. Thompson</i> Examiner's Signature Initials				

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TITLE  
 Actuating device

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